

**CERTIFICATE OF MAILING BY FIRST CLASS MAIL (37 CFR 1.8)**Applicant(s): **R. Bandyopadhyay**

Docket No.

**3479/US**

Application No.

**09/849,683**

Filing Date

**05-04-2001**

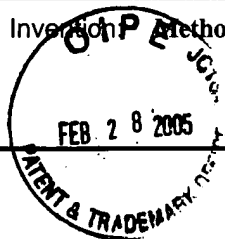
Examiner

**Dwayne C. Jones**

Customer No.

**26648**

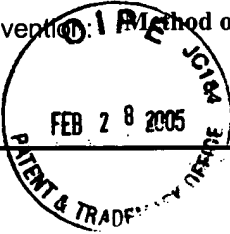
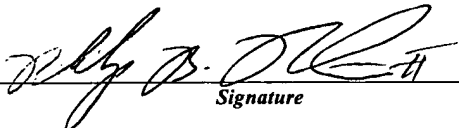
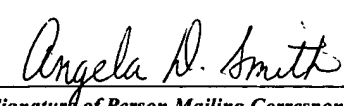
Group Art Unit

**1614**Invention: **Method of Using COX-2 Inhibitors In The Treatment and Prevention of Ocular COX-2 Mediated Disorders**I hereby certify that this **Response to Office Action (9 pgs) and Return Receipt Postcard***(Identify type of correspondence)*

is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope

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**02-24-2005***(Date)***Angela D. Smith***(Typed or Printed Name of Person Mailing Correspondence)**(Signature of Person Mailing Correspondence)***Note: Each paper must have its own certificate of mailing.**

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>					Docket No. <b>3479/US</b>	
Applicant(s): <b>R. Bandyopadhyay</b>						
Application No. <b>09/849,683</b>	Filing Date <b>05/04/2001</b>	Examiner <b>Dwayne C. Jones</b>	Customer No. <b>26648</b>	Group Art Unit <b>1614</b>	Confirmation No. <b>8928</b>	
Invention: <b>Method of Using COX-2 Inhibitors In The Treatment and Prevention of Ocular COX-2 Mediated Disorders</b>						
 <b>COMMISSIONER FOR PATENTS:</b>						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	12 -	12 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	1 -	1 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <b>19-1025</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.						
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>						
 Signature			Dated: <b>February 24, 2005</b>			
<b>Philip B. Polster, II/ Reg. No. 43,864</b> <b>Pharmacia Corporation</b> <b>P.O. Box 1027</b> <b>St. Louis, MO 63006</b>			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on <div style="text-align: center;"> <b>2-24-05</b>            (Date)         </div> <div style="text-align: center;">             Signature of Person Mailing Correspondence         </div> <div style="text-align: center;"> <b>Angela D. Smith</b>            Typed or Printed Name of Person Mailing Correspondence         </div>			
CC:						

1614  
erw



(3479/1)


PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: R. Bandyopadhyay ) GROUP ART UNIT: 1614  
SERIAL NO.: 09/849,683 ) CONFIRMATION NO.: 8928  
EXAMINER: Dwayne C. Jones ) ATTORNEY DOCKET 3479/US  
FILED: 05/04/2001 ) NO.:  
TITLE: METHOD OF USING COX-2 INHIBITORS IN THE TREATMENT  
AND PREVENTION OF OCULAR COX-2 MEDIATED DISORDERS

CERTIFICATE OF MAILING

I hereby certify that this communication and any recited enclosures are being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on February 24, 2005.

  
Angela D. Smith

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

RESPONSE TO OFFICE ACTION

Sir:

This letter is in response to the Office Action of February 9, 2005, having a Shortened Statutory Period for Response that is set to expire on May 9, 2005. The Applicants believe that this response is timely filed, however, please charge any appropriate fees to Deposit Account No 19-1025.

(3479/1)

**Claims** are listed beginning on page 3 of this paper.

**Remarks/Arguments** begin on page 6 of this paper.